

TOWN OF PLAINFIELD ZONING AND BUILDING PERMIT APPLICATION



Property Owner:					
Name: Kimball Union Academy	Phone:	603-469-2152 (Plummer)			
Street: PO Box 188	Email:	dplummer@kua.org			
City State Zip: Meriden, NH 03770					
Project:	Permit Ty	pe: (Check one)			
Street Address: 40 Main Street (Chellis Hall)	l.				
Tax Map: 103 Lot Number: 4 Lot Acrea	ge: 182 Z	oning District: Village Residential (VR)			
Proposed project distances to property lines (in feet):	~30'S Rear: 14	400'+ Side: ~34'W Side: 400'+E			
State Approved Septic Design #: N/A Driveway Permit #: N/A					
Please provide a written description of the project including appropriate dimensions: Remodel kitchen and adjacent bathroom appropriate	of the south apart	ment in Chellis Hall. See attached plans.			
Contractor Information:					
Builder: Elec	trician:	Plumber:			
Builder: Electron Name: KUA Staff Carpenters Name: KUA Staff Electron		Plumber: Name: KUA Staff Plumber			
	ctrician				
Name: KUA Staff Carpenters Name: KUA Staff Ele	ctrician	Name: KUA Staff Plumber			
Name: KUA Staff Carpenters Name: KUA Staff Electronic Name: 603-469-2151 Phone: 603-469-215	ctrician	Name: KUA Staff Plumber Phone: 603-469-2151			
Name: KUA Staff Carpenters Name: KUA Staff Electronic Robins Rob	ctrician 1 plans can be use	Name: KUA Staff Plumber Phone: 603-469-2151 Date: 1//16/2020 d if necessary.			
Name: KUA Staff Carpenters Phone: 603-469-2151 Applicant Signature: Required Attachments: Please provide a copy of plans detailing the project. Hand-drawn Permits cannot be issued without receipt of the proper fee. If you application, contact the town office (603-469-3201).	ctrician 1 plans can be use	Name: KUA Staff Plumber Phone: 603-469-2151 Date: 1//16/2020 d if necessary.			
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DATE:

Permit Status (Permit or Renewal valid for one year from issue date) Must be renewed within 30 days of expiration or a new permit must be applied for.

Permit # **Issued:** RENEWAL REQUIRED BY: NO INSPECTION REQUESTED LAST INSPECTION: YOUR PERMIT REQUIRED INSPECTIONS PER INSPECTION GUIDELINES. RETURN THIS FORM WITH RENEWAL FEE TO TOWN HALL. A CERTIFICATE OF OCCUPANCY WAS REQUIRED PRIOR TO OCCUPYIING YOUR HOUSE A CERTIFICATE OF COMPLETION WAS REQUIRED NAME: ADDRESS: ADDRESS: LOT:

David H Lersch Plainfield Building Inspector 603-381-1929

MAP: